Anthony Marino MD Central Jersey Newborn Care 20 Rogers Ave Manasquan NJ 08736

February 23, 2025

This is an expert report, regarding the death of baby A D (Helmantoler), which was prepared at the request of attorney Michael DeRiso, Esq.

Qualifications:

I am a licensed physician who is actively practicing neonatology. I have been actively practicing medicine since 1992. In 1980 I graduated from Rutgers University-Newark College of Arts and Sciences with Bachelor of Science degrees in zoology and chemistry and a minor in economics. Then, I went to medical school at the Autonomous University of Guadalajara, graduating in 1984. Upon completion of my medical school education, participated in a Fifth Pathway program internship through Rutgers Medical School, finishing in June 1986. I began a pediatric residency at Robert Wood Johnson Medical School at both Robert Wood Johnson University Hospital and Saint Peter's Hospital from 1986 to 1989 then a fellowship at Robert Wood Johnson Medical School at Saint Peter's Hospital from 1989 to 1992. During my fellowship and clinical career, I accumulated extensive experience in Apnea and SIDS, in addition to both common and uncommon illnesses of the term and preterm newborn.

I am board certified by the American Board of Pediatrics in Neonatal-Perinatal Medicine (Neonatology). I have been licensed to practice medicine in the state of New Jersy since 1990. I have maintained a DEA license since 1992. I will be beginning a new position at Ocean University Medical Center and have the following clinical and administrative responsibilities with CentraState Medical Center in Freehold New Jersey:

- 1. Director of Neonatology
- 2. Medical Director-Maternal-Child Health

LIST OF MATERIALS REVIEWED

Mother's medical records from AHN Jefferson Regional Hospital

Baby's medical records from AHN Jefferson Regional Hospital

Baby's medical records from Monogahela Valley Hospital

Autopsy reports of forensic pathologists

L Rozin MD

Edward Mazuchowski MD

Deposition of Edward Mazuchowski MD

Police reports

Baby A was born on to a 22 year old O positive, serology non-reactive, rubella non-immune, Hepatitis B surface antigen negative, Group B strep negative female at 38 1/7 weeks gestation. The mother has a history of stomach ulcer, depression, PTSD, and chlamydia during pregnancy which she was treated with ampicillin and azithromycin.

There was clear fluid when rupture of membranes occurred and delivery occurred vaginally. APGAR scores were 8 and 9 at 1 and 5 minutes respectively. Birth weight was 3420 grams. He had a normal physical exam. The baby was breastfed and he received his first Hepatitis B vaccine in the hospital. He was discharged home on 9/1/2023 with a weight of 3230 gr, a loss of 6% (normal).

On 9/12/2023 EMS was called to the home because the baby wasn't breathing. He was also pulseless so EMS began chest compressions and transported the baby to Monangahela Valley Hospital ER, where he was "coded" until 9:49 AM when he was pronounced dead.

An autopsy was performed by L Rozin MD. Important pertinent negative findings were:

- 1. No petechial findings in conjunctiva of the eyes
- 2. No petechial findings on face
- 3 Nasal bones were intact

- 4. No foreign material in nares
- 5. No foreign material in mouth
- 6. No evidence of trauma in lips
- 7. No evidence of crepitus in bones (no fractures)
- 8. X-Rays showed no evidence of skeletal trauma
- 9. No evidence of skeletal trauma of the bones of the head
- 10. Normal brain on examination

The findings of Edward Mazuchoski MD, who did not actually see the baby or perform the autopsy, were 4x5x0.1 cm subcutaneous hemorrhage over the calvarium (skull bones), but no hemorrhage or injury to the brain or its coverings are noted".

Based on a review of the records and specifically there were no findings suggestive of overlay leading to asphyxiation such as:

- 1. No deviation of nasal bones
- 2. No inversion of lips
- 3. No petechiae
- 4. No foreign bodies or fragments of blankets, clothing in the mouth or the nose
- 5. No skeletal fractures

SIDS or SUID is a term for neonatal death when no obvious causes are found after a death scene investigation and after a postmortem evaluation. This is exactly what we have in the death of baby Asher Davis. Dr. Mazuchoski never gave a reason for Asher's death. He called it SUID and said there were "Extrinsic Factors Identified". In the second paragraph he used the word "may" twice and "depending" once, but never gave a definitive opinion that the cause of death was anything but SIDS.

In the birth hospital records it stated that on a prenatal scan there was an intracardiac echogenic focus noted. It was not evaluated after the baby was born nor recommended that the baby should have a consultation with a pediatric cardiologist after discharge for the purpose of a follow up echocardiogram. If that happened an EKG would also have been done and would detect a prolonged QT interval, which is a risk factor for SIDS. The finding of blood coming out of the nose and mouth can be seen in babies who have had CPR. This is a non-specific finding and is not diagnostic.

Based on my education, training, and 30+ year experience as a neonatologist I am concluding that A death was SIDS. There are no other definitive findings that were presented as having occurred, only suggested. I reserve the right to amend my report if new information is presented. All the opinions contained in this report have been made to a reasonable degree of medical certainty.

Respectfully,

Anthony Marino MD